


Form 990  Department of the Treasury Internal Revenue Service	Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)	OMB No 1545-0047 <div> <div>2009</div> <div>Open to Public Inspection</div> </div>
	The organization may have to use a copy of this return to satisfy state reporting requirements	

A For the 2009 calendar year, or tax year beginning 07-01-2009 and ending 06-30-2010		B Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending		C Name of organization The Henry Francis du Pont Winterthur Museum Inc Doing Business As Number and street (or P O box if mail is not delivered to street address) Room/suite Route 52 City or town, state or country, and ZIP + 4 Winterthur, DE 19735		D Employer identification number 51-0066038 E Telephone number (302) 888-4600 G Gross receipts \$ 211,657,436	
		F Name and address of principal officer Robert Necarsulmer Route 52 Winterthur, DE 19735		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) H(c) Group exemption number			
I Tax-exempt status <input checked="" type="checkbox"/> 501(c) (3) (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527							
J Website: www Winterthur org							
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		L Year of formation 1930		M State of legal domicile DE			





Part I	Summary
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Activities & Governance	1	Briefly describe the organization's mission or most significant activities Winterthur's mission is to inspire, enlighten, and delight all of its visitors while preserving and enhancing its buildings and landscape, its collections and programs, and its history as a great American country estate. In so striving, we invoke the words of our founder, Henry Francis du Pont: "I sincerely hope that the Museum will be a continuing source of inspiration and education for all time, and that the gardens and grounds will of themselves be a country place museum where visitors may enjoy as I have, not only the flowers, trees and shrubs, but also the sunlit meadows, shady wood paths, and the peace and great calm of a country place which has been loved and taken care of for three generations."	
	2	Check this box <input checked="" type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets	
	3	Number of voting members of the governing body (Part VI, line 1a)	2
	4	Number of independent voting members of the governing body (Part VI, line 1b)	2
	5	Total number of employees (Part V, line 2a)	43
	6	Total number of volunteers (estimate if necessary)	30
	7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	17,25
	b	Net unrelated business taxable income from Form 990-T, line 34	-443,41

Revenue		Prior Year	Current Year	
	8	Contributions and grants (Part VIII, line 1h)	6,046,710	4,640,487
	9	Program service revenue (Part VIII, line 2g)	2,240,639	2,007,843
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	438,911	3,818,824
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,326,235	1,101,110
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	10,052,495	11,568,264
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3) . . .	441,798	426,709
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	21,876,363	20,984,013
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	7,934	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶1,212,761		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	14,387,831	12,576,844
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	36,713,926	33,987,566
	19	Revenue less expenses Subtract line 18 from line 12	-26,661,431	-22,419,302
Net Assets or Fund Balances		Beginning of Current Year	End of Year	
	20	Total assets (Part X, line 16)	328,210,129	343,287,417
	21	Total liabilities (Part X, line 26)	23,991,119	29,604,280
	22	Net assets or fund balances Subtract line 21 from line 20	304,219,010	313,683,137

Part II Signature Block

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge	
	*****	2011-05-13
	Signature of officer	Date
	Robert Necarsulmer CFO	
	Type or print name and title	

Paid Preparer's Use Only	Preparer's signature  Peter Kennedy	Date 2011-05-13	Check if self-employed  <input type="checkbox"/>	Preparer's identifying number (see instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4 COVER & ROSSITER PA 62 ROCKFORD ROAD WILMINGTON, DE 19806			EIN 
				Phone no  (302) 656-6632

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

Part III

Statement of Program Service Accomplishments

1

Briefly describe the organization’s mission

Winterthur’s mission is to inspire, enlighten and delight all of its visitors while preserving and enhancing its buildings and landscape, its collections and programs, and its history as a great American country estate

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes

Yes

No

If “Yes,” describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes

Yes

No

If “Yes,” describe these changes on Schedule O

4

Describe the exempt purpose achievements for each of the organization’s three largest program services by expenses

Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code) (Expenses \$ 10,242,281 including grants of \$) (Revenue \$ 2,007,843)

Public Visitation, Membership, and Public Relations Winterthur hosted 116,000 visitors for tours, educational programs, and special and community events during FY10 Member households for the year totaled 8,587 Two new themed tours of the house and garden were added, and training was completed for master guide interpreters The 50th anniversary of Winterthur’s School Programs was an opportunity to bring in more groups on scholarship and expand offerings Nearly 7,300 schoolchildren participated in these offerings through the Public Programs Department Garden programs attracted 2,576 participants at 73 programs Nearly 2,500 members of the community learned about Winterthur through staff lectures at neighboring institutions Winterthur welcomed new visitors through the presentation of five academic conferences, a decorative arts and garden lecture series, collection workshops, and weekly family programs The institution continued to publicize all offerings locally and nationally, with an emphasis on electronic media and finalized the redesigned Web site

4b

(Code) (Expenses \$ 9,738,950 including grants of \$) (Revenue \$)

Curatorial, Conservation, Education, Library Programs Including Collection and Library Materials Winterthur continued to attract audiences through four exhibitions, Faces of a New Nation American Portraits of the 18th and 19th Centuries from the Metropolitan Museum of Art, Good Tidings to You Victorian Christmas Ephemera from the John & Carolyn Grossman Collection, Lost Gardens of the Brandywine, and Flower Power Floral Artistry at Winterthur The exhibition Quilts in a Material World Selections from the Winterthur Collection travelled to the Milwaukee Museum of Art The institution added approximately 8,600 new records and 25,000 digital images to the computerized collection catalogue database The long-term goal of this project is to achieve complete and accurate records and digital images for the whole of the museum collection and to make this information available online This past year 16 graduate students were enrolled in the Winterthur Program in American Material Culture (administered with the University of Delaware), and 30 graduate students studied in the Winterthur/University of Delaware Program in Art Conservation Graduates of these Masters Degree programs serve in museums, historic houses, and conservation facilities in North America, Europe, and elsewhere Additionally, Winterthur hosted 25 visiting scholars who availed themselves of the library collections to research various material culture and design topics The mission of the library is to acquire, catalog, preserve, and make its collections available to the public During FY10 we added approximately 100 archival lots and 2,200 books and periodicals by purchase and gift, cataloged about 1,700 items, and lent 394 books via interlibrary loan We welcomed approximately 1,100 visitors to the manuscript collection and circulated 4,718 items in the printed books collection Staff added significantly to our electronic resources with the production of two digital collections and organized five exhibitions based on library resources "Fly Away," "Good Tidings to You," "The Art of the Stone The Process of Lithography," "Love is in the Air," and "A Sporting Life "

4c

(Code) (Expenses \$ 2,712,876 including grants of \$) (Revenue \$)

Garden Program Winterthur maintains a world-renowned 200-acre naturalistic garden that welcomes visitors from all parts of the globe The collection of rare and historic plants includes magnolias, azaleas, minor bulbs, conifers, and specimen trees Significant varieties in the collection are tracked or "accessioned" through a records system, which currently includes 7,508 plants In FY10 we continued the restoration of numerous garden areas - including Azalea Woods, March Bank, Oak Hill, Peony Garden, and Pathways - and completed the restoration of fountains and statuary in the Reflecting Pool area In addition, the horticulture internship program provided technical experience and on-the-job training to five students during the year

4d

Other program services (Describe in Schedule O) See also Additional Data for Description











(Expenses \$ 3,061,778 including grants of \$) (Revenue \$ 717,232)

4e

Total program service expenses

\$ 25,755,885

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	1	Yes
2	Is the organization required to complete Schedule B, Schedule of Contributors? 	2	Yes
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	No
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 	6	No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II 	7	No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	Yes
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 	9	No
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 	10	Yes
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. 	11	Yes
	• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.		
	• Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.		
	• Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.		
	• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.		
	• Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.		
	• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.		
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII 	12	Yes
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?	Yes	No
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 	12A	No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
14b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Part II	15	No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III	16	No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	No

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to line 25</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable	1a	136	
	b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	Yes
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return	2a	432	
	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?			3a	Yes
b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b	Yes
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a	Yes
b If "Yes," enter the name of the foreign country: CJ, UK See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts				
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . .			5a	No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b	No
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?			5c	
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?			6a	No
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b	
7 Organizations that may receive deductible contributions under section 170(c).				
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?			7a	Yes
b If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	Yes
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c	No
d If "Yes," indicate the number of Forms 8282 filed during the year			7d	
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e	No
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . .			7f	No
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? . . .			7g	No
h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?			7h	
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			8	
9 Sponsoring organizations maintaining donor advised funds.				
a Did the organization make any taxable distributions under section 4966?			9a	
b Did the organization make a distribution to a donor, donor advisor, or related person?			9b	
10 Section 501(c)(7) organizations. Enter				
a Initiation fees and capital contributions included on Part VIII, line 12			10a	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			10b	
11 Section 501(c)(12) organizations. Enter				
a Gross income from members or shareholders			11a	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			11b	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?			12a	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year			12b	

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body	1a	28	
b	Enter the number of voting members that are independent	1b	28	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5	Yes	
6	Does the organization have members or stockholders?	6		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		No
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No

Section B. Policies

(This Section B requests information about policies not required by the Internal Revenue Code.)

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line a or b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed ▶
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply. <input type="checkbox"/> Own website <input checked="" type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶ Robert Necarsulmer Winterthur Museum 5105 Kennett Pike Winterthur, DE 19735 (302) 888-4600

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

☐ Check this box if the organization did not compensate any current or former officer, director, trustee or key employee

[illegible]

1b	Total	1,302,314	0	79,159
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2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **9**

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4	Yes
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
N Barton & Associates 3629 Old Capitol Trl Wilmington, DE 19808	Construction Contractor	269,492
L R Rowe Construction 2904 Shipley Road Wilmington, DE 19810	Construction Contractor	235,950
Page Excavating Company 818 Pennsgrove Rd Lincoln University, PA 19352	Construction Contractor	230,462
Charles C Connell Company 1111 Greenbank Road Wilmington, DE 19808	Construction Contractor	222,430
Cambridge Associates 100 Summer Street Boston, MA 02110	Investment Advisor	186,127

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **13**

Part VIII

Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514		
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a						
	b	Membership dues	1b	798,080					
	c	Fundraising events	1c	459,963					
	d	Related organizations	1d	90,000					
	e	Government grants (contributions)	1e	98,765					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	3,193,679					
	g	Noncash contributions included in lines 1a-1f \$ 205,001							
	h	Total. Add lines 1a-1f		4,640,487					
Program Service Revenue			Business Code						
	2a	Admissions	900,099	1,127,195	1,127,195				
	b	Usage Fees	900,099	231,142	231,142				
	c	Exhibition Participati	900,099	208,156	208,156				
	d	Teaching/Consulting	900,099	60,920	60,920				
	e	Deaccessions	900,099	100	100				
	f	All other program service revenue		380,330	380,330				
	g	Total. Add lines 2a-2f		2,007,843					
Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		4,051,288			4,051,288		
	4	Income from investment of tax-exempt bond proceeds . . .							
	5	Royalties		174,741			174,741		
	6a	Gross Rents	(i) Real	(ii) Personal					
			418,994						
			44,125						
			374,869						
	d	Net rental income or (loss)		374,869			374,869		
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) O ther					
			198,750,456						
			198,982,920						
			-232,464						
	d	Net gain or (loss)		-232,464			-232,464		
	8a	Gross income from fundraising events (not including \$ 459,963 of contributions reported on line 1c) See Part IV, line 18	a	210,978					
			b	Less direct expenses	b	393,965			
			c	Net income or (loss) from fundraising events . . .		-182,987			-182,987
	9a	Gross income from gaming activities See Part IV, line 19	a						
			b	Less direct expenses	b				
			c	Net income or (loss) from gaming activities . . .					
	10a	Gross sales of inventory, less returns and allowances	a	1,402,649					
b			Less cost of goods sold	b	668,162				
c			Net income or (loss) from sales of inventory . . .		734,487	717,232	17,255		
Miscellaneous Revenue		Business Code							
11a									
b									
c									
d	All other revenue								
e	Total. Add lines 11a-11d								
12	Total revenue. See Instructions		11,568,264	2,725,075	17,255	4,185,447			

Part IX

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21				
2	Grants and other assistance to individuals in the U S See Part IV, line 22	426,709	426,709		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	631,736		631,736	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	10,948,205	8,606,633	1,817,886	523,686
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	6,469,978	4,757,835	1,359,462	352,681
9	Other employee benefits	2,094,373	1,493,254	528,847	72,272
10	Payroll taxes	839,721	634,586	170,551	34,584
11	Fees for services (non-employees)				
a	Management				
b	Legal	84,332	6,981	77,351	
c	Accounting	44,000		44,000	
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees	774,048		774,048	
g	Other	136,901	65,831	58,597	12,473
12	Advertising and promotion	357,005	356,787	100	118
13	Office expenses	808,948	701,686	68,475	38,787
14	Information technology	175,163		175,163	
15	Royalties				
16	Occupancy	2,870,900	2,691,662	137,869	41,369
17	Travel	120,542	105,098	10,567	4,877
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	449,521	317,792	50,711	81,018
20	Interest	202,868		202,868	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	4,332,866	3,757,323	524,685	50,858
23	Insurance	248,438		248,438	
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a	Public visitation	449,611	449,611		
b	Library materials	326,035	326,035		
c	Gardens and grounds	247,759	247,759		
d	Collection Acquisitions	226,976	226,976		
e	Marketing program	183,628	183,628		
f	All other expenses	537,303	399,699	137,566	38
25	Total functional expenses. Add lines 1 through 24f	33,987,566	25,755,885	7,018,920	1,212,761
26	Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing				1	
	2	Savings and temporary cash investments			371,053	2	656,004
	3	Pledges and grants receivable, net			2,002,745	3	1,520,620
	4	Accounts receivable, net			404,764	4	540,979
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L				5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use			514,956	8	390,597
	9	Prepaid expenses and deferred charges			85,852	9	51,357
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	98,533,841			
	b	Less accumulated depreciation	10b	60,473,811	39,562,555	10c	38,060,030
	11	Investments—publicly traded securities			139,496,015	11	143,336,232
	12	Investments—other securities See Part IV, line 11			144,143,712	12	157,536,638
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			1,628,477	15	1,194,960
	16	Total assets. Add lines 1 through 15 (must equal line 34)			328,210,129	16	343,287,417
Liabilities	17	Accounts payable and accrued expenses			3,012,181	17	3,159,348
	18	Grants payable				18	
	19	Deferred revenue			142,655	19	192,006
	20	Tax-exempt bond liabilities			4,250,000	20	4,250,000
	21	Escrow or custodial account liability Complete Part IV of Schedule D				21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties			6,490,364	23	6,695,246
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D			10,095,919	25	15,307,680
	26	Total liabilities. Add lines 17 through 25			23,991,119	26	29,604,280
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets			263,893,356	27	271,397,751
	28	Temporarily restricted net assets			21,007,620	28	22,868,527
	29	Permanently restricted net assets			19,318,034	29	19,416,859
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			304,219,010	33	313,683,137
	34	Total liabilities and net assets/fund balances			328,210,129	34	343,287,417

Part XI **Financial Statements and Reporting**

	Yes	No
1 Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? . . .		No
b Were the organization's financial statements audited by an independent accountant?	Yes	
c If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits . . .		

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization The Henry Francis du Pont Winterthur Museum Inc	Employer identification number 51-0066038
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Part I

Reason for Public Charity Status (All organizations must complete this part.) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

- 1

☐

A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 10

☐

An organization organized and operated exclusively to test for public safety See**section 509(a)(4).**
- 11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other

e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box

g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i)

a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?

(ii)

a family member of a person described in (i) above?

(iii)

a 35% controlled entity of a person described in (i) or (ii) above?

h

☐

Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support?
			Yes	No	Yes	No	Yes	No	
Total									

Part II

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	7,372,498	6,679,207	6,557,291	5,320,309	5,122,612	31,051,917
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	7,372,498	6,679,207	6,557,291	5,320,309	5,122,612	31,051,917
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public Support. Subtract line 5 from line 4						31,051,917

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	7,372,498	6,598,673	6,557,291	5,320,309	5,122,612	31,051,917
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	11,931,836	6,598,673	6,899,806	5,863,075	4,645,023	35,938,413
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets						
11 Total support (Add lines 7 through 10)						66,990,330
12 Gross receipts from related activities, etc (See instructions)					12	41,450,433
13 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f))	14	46 350 %
15 Public Support Percentage for 2008 Schedule A, Part II, line 14	15	43 030 %
16a 33 1/3% support test—2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>	
b 33 1/3% support test—2008. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>	
17a 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>	
b 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>	
18 Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions	<input checked="" type="checkbox"/>	

Part IIISupport Schedule for Organizations Described in IRC 509(a)(2)
(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3Gross receipts from activities that are not an unrelated trade or business under section 513						
4Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5The value of services or facilities furnished by a governmental unit to the organization without charge						
6Total. Add lines 1 through 5						
7aAmounts included on lines 1, 2, and 3 received from disqualified persons						
bAmounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
cAdd lines 7a and 7b						
8Public Support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9Amounts from line 6						
10aGross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
bUnrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
cAdd lines 10a and 10b						
11Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13Total support (Add lines 9, 10c, 11 and 12.)						
14First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage

15Public Support Percentage for 2009 (line 8 column (f) divided by line 13 column (f))	15	
16Public support percentage from 2008 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17Investment income percentage for 2009 (line 10c column (f) divided by line 13 column (f))	17	
18Investment income percentage from 2008 Schedule A, Part III, line 17	18	
19a33 1/3% support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		
b33 1/3% support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		
20Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions		

Part IV

Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Additional Data

Software ID:
Software Version:
EIN: 51-0066038
Name: The Henry Francis du Pont Winterthur Museum Inc

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services			
(Code) (Expenses \$	3,061,778	including grants of \$ (Revenue \$ 717,232)
Marketing Program (Expenses \$2,330,847) Winterthur signed three new and renewed 3 existing licensees that will broaden and deepen awareness of the institution with products tightly tied to the collection and museum offerings Similarly, the retail stores have continued to grow an Internet presence that integrates the two on-site stores with our Web site, thereby increasing knowledge of Winterthur while providing a revenue opportunity Publications Program (Expenses \$730,931) In FY 10 the Publications Office at Winterthur successfully shepherded three new book projects to completion The du Ponts Houses and Gardens in the Brandywine (September 2009), Success to America Creamware for the American Market from the S Robert Teitelman Collection at Winterthur (March 2010), and Early American Decorative Arts (June 2010), a revised edition of the original publication In addition, all editing was completed for the soon-to-be-published exhibition catalogue Paint, Pattern & People Furniture of Southeastern Pennsylvania, 1725-1850 Winterthur also continued to make significant contributions to the field through its academic journal, Winterthur Portfolio			

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Dr David P Roselle Executive Director and Trustee	50 00	X		X		X		263,616	0	12,250
Mr Rodman Ward Jr Chairman	1 00	X		X				0	0	0
Mrs Elizabeth B Johnson Vice Chairman	1 00	X		X				0	0	0
Mr Pierre du Pont Hayward Vice Chairman and Secretary	1 00	X		X				0	0	0
Mrs Cecile Drackett Allyn Trustee	1 00	X						0	0	0
Ms Carol A Ammon Trustee	1 00	X						0	0	0
Mrs Penny M Ashford Trustee	1 00	X						0	0	0
Mrs Katharine P Booth Trustee	1 00	X						0	0	0
Mrs W L Lyons Brown Jr Trustee	1 00	X						0	0	0
Mr William K du Pont Trustee	1 00	X						0	0	0
Mr Morrison H Heckscher Trustee	1 00	X						0	0	0
Mr John A Herdeg Trustee	1 00	X						0	0	0
Mr Frank L Hohmann III Trustee	1 00	X						0	0	0
Mrs Olivia Barclay Jones Trustee	1 00	X						0	0	0
Mrs Richard I G Jones Trustee	1 00	X						0	0	0
Mr Barron U Kidd Trustee	1 00	X						0	0	0
Mrs Greta B Layton Trustee	1 00	X						0	0	0
Mr Joshua W Martin III Trustee	1 00	X						0	0	0
Mr John L McGraw Trustee	1 00	X						0	0	0
Mrs Elizabeth H Owens Trustee	1 00	X						0	0	0
Mr Bruce C Perkins Trustee	1 00	X						0	0	0
Mrs Lynn Springer Roberts Trustee	1 00	X						0	0	0
Mr Geoffrey M Rogers Trustee	1 00	X						0	0	0
Dr Thomas R Ryan Trustee	1 00	X						0	0	0
Mr John A Sargent Trustee	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)							(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former				
Mr Mark E Stalnecker Trustee	1 00	X							0	0	0
Mr George Strawbridge Jr Trustee	1 00	X							0	0	0
Mr P Coleman Townsend Jr Trustee	1 00	X							0	0	0
Mrs Susan M Townsend Trustee	1 00	X							0	0	0
Mr Richard W Vieser Trustee	1 00	X							0	0	0
Dr Richard C Weiss Trustee	1 00	X							0	0	0
The Honorable W L Lyons Brown Jr Chairman & Trustee Emeritus	1 00	X							0	0	0
Mr Samuel Schwartz Chairman & Trustee Emeritus	1 00	X							0	0	0
Mrs George P Bissell Jr Trustee Emerita	1 00	X							0	0	0
Mrs Robert W Duemling Trustee Emerita	1 00	X							0	0	0
Mrs Julia Bissell Leisenring Trustee Emerita	1 00	X							0	0	0
Ruth Lord Trustee Emerita	1 00	X							0	0	0
Mr Blaine T Phillips Trustee Emeritus	1 00	X							0	0	0
Mr David D Wakefield Trustee Emeritus	1 00	X							0	0	0
Mr David B Warren Trustee Emeritus	1 00	X							0	0	0
Mr Charles O Wood III Trustee Emeritus	1 00	X							0	0	0
Mr Edmond L Lincoln Honorary Trustee	1 00	X							0	0	0
Mr George A Weymouth Honorary Trustee	1 00	X							0	0	0
Mr Millard G Gamble Trustee Emeritus - in Memoriam	0 00	X							0	0	0
Mr Robert Necarsulmer CFO and Treasurer	50 00			X		X			164,926	0	1,698
Ms Jane Drummond Assistant Secretary	50 00			X					61,180	0	2,181
Ms Denise D Adams Assistant Treasurer	50 00			X					71,271	0	2,019
Mr Christopher Strand Dir -Garden and Estate	50 00					X			127,660	0	19,830
Mr Brock Jobe Professor	50 00					X			141,435	0	2,857
Mr Robert R Davis Dir -Development	50 00					X			186,474	0	11,979

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Mr John Savage Dir -Museum Affairs	50 00					X		147,332	0	9,585
Ms Lisbeth Selsor Dir -Human Resources	50 00					X		138,420	0	16,760

Form 990, Part VIII - Statement of Revenue - 2a - 2g Program Service Revenue -

	Business Code	(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
Admissions	900,099	1,127,195	1,127,195		
Usage Fees	900,099	231,142	231,142		
Exhibition Participati	900,099	208,156	208,156		
Teaching/Consulting	900,099	60,920	60,920		
Deaccessions	900,099	100	100		

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

<i>Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Public visitation	449,611	449,611		
Library materials	326,035	326,035		
Gardens and grounds	247,759	247,759		
Collection Acquisitions	226,976	226,976		
Marketing program	183,628	183,628		

SCHEDULE D

(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► **Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11, or 12.**
► **Attach to Form 990. ► See separate instructions.**

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization
The Henry Francis du Pont Winterthur Museum Inc

Employer identification number
51-0066038

Part I

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	

Part II

Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1	Purpose(s) of conservation easements held by the organization (check all that apply) <div><input type="checkbox"/> Preservation of land for public use (e g , recreation or pleasure) <input type="checkbox"/> Preservation of an historically importantly land area</div> <div><input type="checkbox"/> Protection of natural habitat <input type="checkbox"/> Preservation of a certified historic structure</div> <div><input type="checkbox"/> Preservation of open space</div>											
2	Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year											
		<table><tr><td></td><td>Held at the End of the Year</td></tr><tr><td>a</td><td>Total number of conservation easements</td></tr><tr><td>b</td><td>Total acreage restricted by conservation easements</td></tr><tr><td>c</td><td>Number of conservation easements on a certified historic structure included in (a)</td></tr><tr><td>d</td><td>Number of conservation easements included in (c) acquired after 8/17/06</td></tr></table>		Held at the End of the Year	a	Total number of conservation easements	b	Total acreage restricted by conservation easements	c	Number of conservation easements on a certified historic structure included in (a)	d	Number of conservation easements included in (c) acquired after 8/17/06
	Held at the End of the Year											
a	Total number of conservation easements											
b	Total acreage restricted by conservation easements											
c	Number of conservation easements on a certified historic structure included in (a)											
d	Number of conservation easements included in (c) acquired after 8/17/06											
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ► _____											
4	Number of states where property subject to conservation easement is located ► _____											
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>											
6	Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ► _____											
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$ _____											
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>											
9	In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements											

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a	If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items	
b	If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items	
	(i) Revenues included in Form 990, Part VIII, line 1	► \$ _____
	(ii) Assets included in Form 990, Part X	► \$ _____
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items	
a	Revenues included in Form 990, Part VIII, line 1	► \$ _____
b	Assets included in Form 990, Part X	► \$ _____

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☒

Public exhibition

d

☐

Loan or exchange programs

b

☒

Scholarly research

e

☐

Other

c

☒

Preservation for future generations

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☒ No

Part IV

Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a Beginning of year balance	284,579,194	367,888,107			
b Contributions	164,852	471,454			
c Investment earnings or losses	35,635,149	-64,117,573			
d Grants or scholarships	346,652	346,342			
e Other expenditures for facilities and programs	18,372,119	18,467,658			
f Administrative expenses	774,048	848,794			
g End of year balance	300,886,376	284,579,194			

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶

87.330 %

b

Permanent endowment ▶

6.450 %

c

Term endowment ▶

6.220 %

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i)

unrelated organizations

(ii)

related organizations

3a(i)

No

3a(ii)

No

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

3b

4

Describe in Part XIV the intended uses of the organization's endowment funds

Part VI

Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		6,705,791		6,705,791
b Buildings		74,585,105	45,410,246	29,174,859
c Leasehold improvements				
d Equipment		17,242,945	15,063,565	2,179,380
e Other				
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				38,060,030

Schedule D (Form 990) 2009

Part XI

Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	11,568,264
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	33,987,566
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-22,419,302
4	Net unrealized gains (losses) on investments	4	31,889,198
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-5,769
9	Total adjustments (net) Add lines 4 - 8	9	31,883,429
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	9,464,127

Part XII

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	43,745,542
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	31,889,198
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	1,062,127
e	Add lines 2a through 2d	2e	32,951,325
3	Subtract line 2e from line 1	3	10,794,217
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	774,047
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	774,047
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	11,568,264

Part XIII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	34,281,415
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	1,062,127
e	Add lines 2a through 2d	2e	1,062,127
3	Subtract line 2e from line 1	3	33,219,288
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	774,047
b	Other (Describe in Part XIV)	4b	-5,769
c	Add lines 4a and 4b	4c	768,278
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	33,987,566

Part XIV

Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Identif ier	Return Reference	Explanation
Part III, Line 1a		In conformity with FASB ASC 958-605 (formerly Statement of Financial Accounting Standards, Number 116 - Accounting for Contributions Received and Contributions Made), the financial statements exclude the value of the collection objects and library holdings No determination can be made as to the aggregate value of such items Winterthur records proceeds from deaccessions and disbursements for current period accessions in the statement of activity as revenue and expenditures, respectively Proceeds from sales of collection items are limited to the acquisition of other items for collections Winterthur employs conservation and curatorial staff to ensure that the collection is protected and preserved
Part X	Description of Uncertain Tax Positions Under FIN 48	Winterthur has adopted the provisions of FASB Interpretation No 48 (FASB ASC 740-10-50), Accounting for Uncertainty in Income Taxes Management continually evaluates uncertain tax positions and expiring statutes of limitations, audits, proposed settlements, changes in tax law and new authoritative rulings, as applicable Management's evaluation is that there is no income tax liability This evaluation is based on settled and established positions within the Internal Revenue Code and management believes there is no significant uncertainty related to its evaluation
Part XI, Line 8 - Other Adjustments		Direct Mail and Fulfillment Center Transition -5769
Part XII, Line 2d - Other Adjustments		Special Event Expenses 393965 Cost of Goods Sold 668162
Part XIII, Line 2d - Other Adjustments		Special Event Expenses 393965 Cost of Goods Sold 668162
Part XIII, Line 4b - Other Adjustments		Direct Mail and Fulfillment Center Transition -5769

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19,
or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization
The Henry Francis du Pont Winterthur Museum Inc

Employer identification number
51-0066038

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.
Form 990-EZ filers are not required to complete this part.

1

Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a

☐ Mail solicitations

b

☐ Internet and e-mail solicitations

c

☐ Phone solicitations

d

☐ In-person solicitations

e

☐ Solicitation of non-government grants

f

☐ Solicitation of government grants

g

☐ Special fundraising events

2a

Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising activities?

☐ Yes ☐ No

b

If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total ▶						

3

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

Revenue			(a) Event #1 Point to Point Races (event type)	(b) Event #2 Delaware Antiques Show (event type)	(c) Other Events (total number)	(d) Total Events (Add col (a) through col (c))
	1	Gross receipts	364,858	306,083		670,941
	2	Less Charitable contributions	343,865	116,098		459,963
	3	Gross income (line 1 minus line 2)	20,993	189,985		210,978
Direct Expenses	4	Cash prizes				
	5	Non-cash prizes				
	6	Rent/facility costs		6,042		6,042
	7	Food and beverages	23,638	70,548		94,186
	8	Entertainment				
	9	Other direct expenses	181,185	112,552		293,737
	10	Direct expense summary Add lines 4 through 9 in column (d)				393,965
	11	Net income summary Combine lines 3, column d, and line 10.				-182,987

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
	1	Gross revenue				
Direct Expenses	2	Cash prizes				
	3	Non-cash prizes				
	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7	Direct expense summary Add lines 2 through 5 in column (d)				
	8	Net gaming income summary Combine lines 1, column d, and line 7				

			Yes	No
9	Enter the state(s) in which the organization operates gaming activities _____			
a	Is the organization licensed to operate gaming activities in each of these states?	9a		
b	If "No," Explain _____ _____			
10a	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	10a		
b	If "Yes," Explain _____ _____			
11	Does the organization operate gaming activities with nonmembers?	11		
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	12		

		Yes	No
13	Indicate the percentage of gaming activity operated in		
a	The organization's facility 13a		
b	An outside facility 13b		
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records		
Name ► _____			
Address ► _____			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a	
b	If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____		
c	If "Yes," enter name and address		
Name ► _____			
Address ► _____			
16	Gaming manager information		
Name ► _____			
Gaming manager compensation ► \$ _____			
Description of services provided ► _____			
<input type="checkbox"/> Director/officer <input type="checkbox"/> Employee <input type="checkbox"/> Independent contractor			
17	Mandatory distributions		
a	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	17a	
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ _____		

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
The Henry Francis du Pont Winterthur Museum Inc

Grants and Other Assistance to Organizations,
Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990

OMB No 1545-0047

2009

Open to Public
Inspection

Employer identification number
51-0066038

Part I

General Information on Grants and Assistance

- 1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No
- 2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed ▶ ☐

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance

2

Enter total number of section 501(c)(3) and government organizations

▶

3

Enter total number of other organizations

▶

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2009

Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization The Henry Francis du Pont Winterthur Museum Inc	Employer identification number 51-0066038
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Part I

Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items		
	<div><div><input type="checkbox"/> First-class or charter travel</div><div><input type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Tax idemnification and gross-up payments</div><div><input type="checkbox"/> Discretionary spending account</div></div> <div><div><input type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input checked="" type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div>		
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain	1b	Yes
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply		
	<div><div><input checked="" type="checkbox"/> Compensation committee</div><div><input type="checkbox"/> Independent compensation consultant</div><div><input type="checkbox"/> Form 990 of other organizations</div></div> <div><div><input type="checkbox"/> Written employment contract</div><div><input checked="" type="checkbox"/> Compensation survey or study</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div>		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization		
a	Receive a severance payment or change-of-control payment?	4a	No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III		
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.		
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of		
a	The organization?	5a	No
b	Any related organization?	5b	No
	If "Yes," to line 5a or 5b, describe in Part III		
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of		
a	The organization?	6a	No
b	Any related organization?	6b	No
	If "Yes," to line 6a or 6b, describe in Part III		
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	No
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	8	No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9	

Part II

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
Dr David P Roselle	(i)	263,616	0	0	12,250	8,797	284,663	135,022
	(ii)	0	0	0	0	0	0	0
Mr Robert Necarsulmer	(i)	164,926	0	0	1,698	5,977	172,601	151,111
	(ii)	0	0	0	0	0	0	0
Mr Robert R Davis	(i)	186,474	0	0	11,979	989	199,442	175,544
	(ii)	0	0	0	0	0	0	0
Mr John Savage	(i)	147,332	0	0	9,585	6,167	163,084	135,474
	(ii)	0	0	0	0	0	0	0
Ms Lisbeth Selsor	(i)	138,420	0	0	3,472	14,931	156,823	128,452
	(ii)	0	0	0	0	0	0	0

Part III **Supplemental Information**

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
Supplemental Information	Part III	Compensation for the calendar year 2009 included 27 bi-weekly pay dates as determined by the payroll calendar. The payroll calendar for 2008 included only 26 bi-weekly pay dates.

Schedule L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b.
► Attach to Form 990 or Form 990-EZ. ►See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization The Henry Francis du Pont Winterthur Museum Inc	Employer identification number 51-0066038
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Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 ► \$ _____

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ► \$ _____

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c)Original principal amount	(d)Balance due	(e) In default?		(f) Approved by board or committee?		(g)Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
Total ► \$ _____										

Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b)Relationship between interested person and the organization	(c)A mount of grant or type of assistance

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
Ruth Lord	Daughter of Founder		Pursuant to bequest, she is given the right to use Residence #6 rent-free for life without paying maintenance costs Winterthur was given the remainder interest in the property Mrs Lord is currently permitting Winterthur to use Residence #6 to house visiting scholars & associates		No
Mr Joshua W Martin III	Partner at law firm used by Winterthur		The Trustee does no work for the Winterthur account & no consideration is given to Winterthur's work with the firm in the determination of the amount of compensation the Trustee receives from the firm It is also important to note that the Trustee was on the Winterthur Board for a number of years before he joined Potter, Anderson and Corroon and Potter, Anderson and Corroon was Winterthur's primary law firm for many years before the Trustee joined the firm However, to preclude any conflict, Winterthur and the Trustee have agreed that he should serve on neither the Audit Committee nor the Human Resources Committee (which sets compensation for the Director)		No

SCHEDULE M
(Form 990)

NonCash Contributions

OMB No 1545-0047

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►Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30.
► Attach to Form 990.

Name of the organization
The Henry Francis du Pont Winterthur Museum Inc

Employer identification number
51-0066038

Part I

Types of Property

	(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art—Works of art	X	344	0	FASB ASC 958-360-25
2 Art—Historical treasures				
3 Art—Fractional interests	X	1	0	FASB ASC 958-360-25
4 Books and publications	X		0	FASB ASC 958-360-25
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	28	205,001	Fair Market Value
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► ()				
26 Other ► ()				
27 Other ► ()				
28 Other ► ()				
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement	29			9

30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	Yes	No
b	If "Yes," describe the arrangement in Part II		
31	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	Yes	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?	Yes	
b	If "Yes," describe in Part II		
33	If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II		

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
Third Party Use	Part I, Line 32b	Deaccessioned material is sold through public auction houses (ie Pook & Pook, Inc and Christie's) Winterthur uses a brokerage account with an unrelated financial institution to process non-cash contributions of stock
Non Reporting of Revenue	Part I, Line 33	A zero amount is reported in Sch M, Part I, line 3(c), because Winterthur does not capitalize its collection, as allowed under FASB ASC 958-360-25 (formerly SFAS 116)

Additional Data

Software ID:
Software Version:
EIN: 51-0066038
Name: The Henry Francis du Pont Winterthur Museum Inc

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493136017101

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990
Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.
▶ Attach to Form 990.

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Name of the organization The Henry Francis du Pont Winterthur Museum Inc	Employer identification number 51-0066038
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Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 2		Some Board members share a family relationship

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 5		A single employee over a period of time spanning several years made personal charges on the Winterthur credit card totaling approximately \$294,000. Upon identifying the theft, the employee was immediately terminated, charges were filed with the State Police and the former employee pled guilty and was ordered to pay restitution. Winterthur tightened its policies and procedures for the users of the Organization's credit card, including lowering the amount allowed per transaction, lowering the dollar amount of transactions allowed per month and performing monthly audits of the credit card purchases. The large majority (more than 90%) of the loss was recovered through insurance.

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		The Audit Committee reviews the Form 990 before the return is signed and filed.

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		Each Trustee must complete a Conflict of Interest Policy Disclosure Statement upon his/her election to the Board and annually thereafter. Board members are required to acknowledge a potential conflict to the Board prior to entering into a transaction with the Museum. The minutes of the Board meeting at which a disclosure of conflict is made shall reflect the occurrence and the outcome. The Executive Director monitors contracts and vendor payments for potential conflicts of interest and informs the Chairman of the Board. The Chairman then brings the potential conflict to the Board for discussion when deemed possibly material.

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		The Human Resources Committee of the Board of Trustees oversees a national salary survey every three years. The Committee also gathers local salary data to help establish current market values for the Museum's salaried positions. The collected survey data supports a salary structure that aligns every position within a salary range. The Human Resources Committee reviews all salary rates including the Executive Director and departmental Directors and then approves the rates of pay prior to budget approval for the next fiscal year.

Identifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		While the Museum routinely provides copies of the audited financial statements when requested, it has never received a request for its conflict of interest policy or governing documents. Although there is no legal requirement that it do so, in the interest of transparency, requests of this nature will be evaluated by the Museum and responded to on a case by case basis.

Identifier	Return Reference	Explanation
Form 990, Part XI, Line 2c		Winterthur has an Audit Committee that is responsible for the selection and oversight of the independent auditor.

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

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Name of the organization
The Henry Francis du Pont Winterthur Museum Inc

Employer identification number
51-0066038

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)					
(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)					
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity
Friends of Winterthur Rt 52 Winterthur, DE 19735 51-6018240	Develop Winterthur as a research center for scholars to study art & culture	DE	501(c)(3)	509(a)(1)	

Part III

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	
							Yes	No		Yes	No

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership

Part V

Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III or IV

1

During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a

Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity

b

Gift, grant, or capital contribution to other organization(s)

c

Gift, grant, or capital contribution from other organization(s)

d

Loans or loan guarantees to or for other organization(s)

e

Loans or loan guarantees by other organization(s)

f

Sale of assets to other organization(s)

g

Purchase of assets from other organization(s)

h

Exchange of assets

i

Lease of facilities, equipment, or other assets to other organization(s)

j

Lease of facilities, equipment, or other assets from other organization(s)

k

Performance of services or membership or fundraising solicitations for other organization(s)

l

Performance of services or membership or fundraising solicitations by other organization(s)

m

Sharing of facilities, equipment, mailing lists, or other assets

n

Sharing of paid employees

o

Reimbursement paid to other organization for expenses

p

Reimbursement paid by other organization for expenses

q

Other transfer of cash or property to other organization(s)

r

Other transfer of cash or property from other organization(s)

Yes

No

1a

1b

1c

1d

1e

1f

1g

1h

1i

1j

1k

1l

1m

1n

1o

1p

1q

1r

No

No

Yes

No

No

No

No

No

No

No

No

No

No

No

No

No

No

No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved
(1) Friends of Winterthur	C	90,000
(1) See Additional Data Table		
(2)		
(3)		
(4)		
(5)		
(6)		

Schedule R (Form 990) 2009

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

[illegible]